

Bidets/Water Fountains

☐ Cash ☐ Cheque ☐ Interac ☐ M/C ☐ Visa

Receipt #:\_

Urinals

Other

\*\$4.50 or 4% of the permit fee maximum \$560.00

■ Mobile

☐ Manufactured

Payment Type:

Permit Fee: \$

+ SCC Levy\*: \$

Total Cost: \$

## **Summer Village of Seba Beach**

PO Box 190 SEBA BEACH AB T0E 2B0 Phone: (780) 797 3863 Fax: (780) 797 3800 www.sebabeach.ca



☐ ANNUAL PERMIT

Toll Free: (866) 454 5222

The Inspections Group Inc.

www.inspectionsgroup.com

questions@inspectionsgroup.com

(780) 454 5048

(780) 454 5222

Phone:

300W, 14310 – 111 Avenue NW EDMONTON AB T5M 3Z7 30) 454 5048 Toll Free: (866) 554 5048

## PLUMBING PERMIT APPLICATION FORM Application Date: Estimated Project Completion Date: Applicant Type: Homeowner Contractor Cost of Installation (Labor & Material including Equipment): The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90 days of issue of the permit, (b) is suspended or abandoned for a period of 120 days. An extension may be considered when applied for in writing prior to permit expiry date. Owner Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_ \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_ Email: Owner's Signature / Declaration (Single Family Residential Only) "I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the Company Name: Mailing Address: Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Installer's Number Print Installer's Name Installer's Signature Project Location in the Summer Village of Seba Beach: Street Address: \_ Legal Subdivision: Part of: Section: Township: Range: West of: Subdivision Name:\_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_ Plan: \_\_\_\_ Directions: \_ NUMBER OF FIXTURES: TYPE OF WATER AND OR SEWER SERVICE: PLUMBING DESCRIPTION OF OCCUPANCY: WORK: ☐ Disconnect from Septic Connect to ☐ Residential Kitchen Sinks Basins Municipal Sewer ☐ Farm/Ranch Showers ☐ Commercial Laundry Toilets ☐ Water and/or Sewer Services ☐ Industrial Washers ☐ Oilfield/Gas **Bathtubs** Floor Drains ■ Mobile Home/Factory Assembled ☐ Institutional Grease Traps

REMIT PAYMENT AND APPLICATION TO THE INSPECTIONS GROUP INC.

**Building Connection** 

PLEASE CONTACT THE INSPECTIONS GROUP INC. FOR INSPECTIONS ALLOWING 2 - 5 WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS.